

**MAIL TO:**

California Department of Food and Agriculture
Bureau of Livestock Identification
1220 "N" Street, Room A-130
Sacramento, CA 95814

NOTICE OF CHANGE OF ADDRESS

Please save this blank document to your computer. Once saved to your computer, locate and complete the form. After the form is completed, save the form again. Print and mail to the address above

INSTRUCTIONS:

- Enter the information below as shown on the document, i.e., California Brand Registration Certificate for a requested change.
- Names not matching Bureau of Livestock Identification records and/or unreadable information cannot be updated.

**Date of Address
Change Request**

**Name of Requestor if
registrant is a minor**

**Personal
Information**

Last Name

Brand Recording Number

First Name

Initial

**New or Correct
Mailing Address**

Street Number Only

P. O. Box or Street Name and Private Mail Box

Apt. No.

City

State

Zip Code

Telephone

Old Address

Street Number

Street Name

City

County

For Official Use Only: Date Processed _____ Technician _____